_		L FINANCIAL REPORT FOR 20	
Name and Address of Commercial Fundraiser;		Name and Address of Charitable Or	-
CF Number 1237		CT Number 1720 🗸	F.E.I.N. No. 94-6050466
Donate For Charity		We Care Services for Child	Iren
Name of Commercial Fundraiser		Name of Charity.	
1436 Second St Suite 258		2191 Kirker Pass Rd	
Address of Commercial Fundralser Napa, CA 94559		Address of Charity Concord CA	94521
City, State, and ZIP Code of Commercial Fundraiser		City, State, and ZIP Code of Charity	
	alifornia Campaign 🔀	3.7, 3.1.3, 3.1.3	
Vehicle donation processing	held (on) (from) January	1, 2005 to Decem	ber 31, 2005
(Type of Activity)		, ,	
1. REVENUE A. Car/Truck Sales B. Boat Sales C. Real Estate Sales D. Other sources: (Specify) a. Motorcycle Sales b. RV Sales c. d.	· :	\$4,500,00 A. \$0,00 B. \$0,00 C. \$0,00 Da. \$0,00 Db. Dc. Dd.	
E. TOTAL REVENUE	_	DG.	\$4,500.00 E.
2. EXPENSES			<u>\$4.300.00</u> E.
A. Fees or commissions paid by commercial fundrals B. Salaries C. Payroll Taxes D. Employee Benefits E. Towing F. Vehicle Repairs G. Parts H. DMV Fees I. Appraisals J. Detailing K. Advertising L. Telephone M. Other expenses (Specify) a. Auction Fees b. Administrative Fees c. d.		\$1.110.75 A. B. C. D. \$217.50 E. F. G. H. I. J. K. L. \$300.00 Ma. \$280.00 Mb. Mc. Md.	
N. TOTAL EXPENSES			\$1,908.25 N.
3. Distribution or net to charitable organization or charitab	e purposes		\$2,591,753.
4. Less additional expenses relating to operation of vehicle donation program paid by charity			4.
Total Amount charity realized from operation of vehicle donation program			\$2,591.75 5.
(a) Does any officer, director, partner or owner of the C organization for which the commercial fundraiser has [] Yes [X] No if "yes" complete the following the following state of the commercial fundraiser has	contracted to solicit?	affiliation with or control, directly or i	indirectly, the charitable
Name of officer, director, partner or owner of	Name and address	s of	Relationship of officer, etc.

Name of officer, director, partner or owner of Commercial Fundraiser	Name and address of charitable organization	Relationship of officer, etc. To charitable organization
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b) For each affiliation identified in 6(a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete